PTO/SB/05 (08-03)

## UTILITY PATENT APPLICATION **TRANSMITTAL**

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UTILITY PATENT APPLICATION TRANSMITTAL  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	02-022.23		
	First Inventor	Hearn		
	Title	Low Mount Seat Guide Loop		
	Express Mail Label No.	ET 905558759US		

		Express Mail Laber No. C. 103 930 10 10							
See MPEP o	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450							
2. Applica See 37 3. Specifi (preferrence - Descrence - Crosse - Statere - Referrence - Backgeren - Backgeren - Detail - Ctaim	red arrangement set forth below) riptive title of the invention Reference to Related Applications ment Regarding Fed sponsored R & D ence to sequence listing, a table, omputer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) led Description (s)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS							
4. Drawir 5. Oath or Declar New b. Cop (for i	py from a prior application (37 CFR 1.63(d)) r continuation/divisional with Box 18 completed)  DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). ication Data Sheet. See 37 CFR 1.76  NUING APPLICATION, check appropriate box, and sufflowing the title, or in an Application Data Sheet under	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 0ther:  Apply the requisite information below and in the first sentence of the 37 CFR 1.76:							
Prior application information: Examiner									
19. CORRESPONDENCE ADDRESS  OR Correspondence address below									
Name	Andreou & Casson, Ltd. ATTN: Heather A. Wakefield								
	332 South Michigan Avenue								
Address	Suite 1144								
City	Chicago	State Illinois Zip Code 60604							
Country	USA	elephone 312-935-2000 Fax 312-935-2001							
Name (Print/Type)   Heather A. Wakefield   Registration No. (Attorney/Agent)   53,732									
Signature	Heather a. Wholuld	Date 12/15/03							

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governey by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032

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<b>ド FEE TRANSMITTAL</b>		Application Number		T					
for EV 0004		Filing Date							
for FY 2004		First Named Inventor		ntor	Ham				
Effective 10/01/2003. Patent fees are subject to annual revision.		Examiner Name		-	10				
Applicant claims small entity status. See 37 CFR 1.27				<del>-  </del>		<del></del>			
TOTAL AMOUNT OF PAYMENT (\$)		Art Unit Attorney Docket No.			02-022.23		—— <u>}</u>		
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Order None		3. ADDITIONAL FEES							
Deposit Account:	<u>Large</u> Fee	Large Entity   Small Entity  Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe							
Deposit 502438	Code	e (\$)	Code (\$)		Fee Description	,	Fee Paid		
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Account Name	1052	50	2052 25	cover	arge - late provisional filin sheet	ng fee or			
The Director is authorized to: (check all that apply)	1053		1		nglish specification				
Charge fee(s) indicated below Credit any overpayments	1812	2,520 920*	· ·		ng a request for <i>ex parte</i> esting publication of SIR p		<del>  </del>		
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Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	* 1805 1,840* Requesting publication of SIR after Examiner action		after				
FEE CALCULATION	1251	110			month				
1. BASIC FILING FEE		420	2252 210	Exten	sion for reply within seco	nd month	I		
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1001 770 2001 385 Utility filing fee		2,010	l '	Exten	sion for reply within fifth i	month	<del></del>		
1002 340 2002 170 Design filing fee	1401			_	e of Appeal				
1003 530 2003 265 Plant filing fee 1004 770 2004 385 Reissue filing fee	1402 1403			_	a brief in support of an a est for oral hearing	ppeal			
1004 770   2004 385   Reissue filing fee		1,510		-	on to institute a public use	e proceeding			
SUBTOTAL (1) (\$) 770	1452	•			on to revive - unavoidable				
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2501 665	Utility	issue fee (or reissue)				
Extra Claims below Fee Paid  Total Claims	1502			-	n issue fee		I		
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Multiple Dependent	1807	50			essing fee under 37 CFR				
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Fee Fee Fee Fee <u>Fee Description</u> Code (\$)	8021	40		Recor	ding each patent assignn	ment per			
1202 18 2202 9 Claims in excess of 20	1809	770			rty (times number of prop a submission after final r	,	<del>                                     </del>		
1201 86 2201 43 Independent claims in excess of 3				(37 Č	FR 1.129(a))	·			
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1810	770	2810 385		ach additional invention to ined (37 CFR 1.129(b))	o be			
over original patent	180	1 770	2801 385		est for Continued Exami	ination (RCE)			
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SUBTOTAL (2) (\$) **or number previously paid, if greater; For Reissues, see above	*Red	luced by	Basic Filing F	ee Pai	SUBTOTAL (	3) (\$)	6 180		
SUBMITTED BY (Complete (if applicable))									
Name (Print/Type) Heather A. While led Registration No. 63,732 Telephone 312-935 - 2000									
Signature Wath a history	3	(Attorney	Agent) U	٠,	Date	12/15/15	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
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